| PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004  CLAIMS AS FILED - PART I  (Column 1) (Column 2) TYPE   | g   | PATE         |                    | Application or Docket N |  |                              |                 |           |                 |            |                                       |          |                    |              |   |  |
|---|---|--------------|--------------------|-------------------------|--|------------------------------|-----------------|-----------|-----------------|------------|---------------------------------------|----------|--------------------|--------------|---|--|
| TOTAL CLAIMS  FOR  NUMBER FLED  NUMBER EXTRA  TOTAL CHARGEABLE CLAIMS  MINUS 20:  "MULTIPLE DEPENDENT CLAIM PRESENT  "If the difference in column 1 is less than zero, enter "0" in column 2  "If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  **CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  **CLAIMS AS AMENDED - PART II  (Column 3)  **CLAIMS AS AMENDED - PART II  (Column 3)  **CLAIMS AS AMENDED - PART II  (Column 4)  **CLAIMS AS AMENDED - PART II  (Column 5)  **CLAIMS AS AMENDED - PART II  (Column 7)  (Column 8)  **CLAIMS AS AMENDED - PART II  (Column 1)  (Column 1)  (Column 2)  (Column 3)  **TOTAL OR TOTAL  OR TOTAL  TOTAL  TOTAL  ADDIT FEE  OR X\$50=  TOTAL  OR X50=  **TOTAL  OR ADDIT FEE  TIONAL  FEE  OR X50=  **TOTAL  OR ADDIT FEE  TIONAL  FEE  TOTAL  OR ADDIT FEE  TIONAL  FEE  TOTAL  OR ADDIT FEE  TOTAL  ADDIT FEE  TOTAL  OR ADDIT FEE  TOTAL  OR ADDIT FEE  TOTAL  ADDIT FEE  TOTAL  OR ADDIT FEE  TOTAL  OR ADDIT FEE  TOTAL  OR ADDIT FEE  TOTAL  ADIT FEE  TOTAL  ADDIT FEE  TOTAL  ADDIT FEE  TOTAL  ADDIT FEE  TOT   | <u> </u>                                  |              | ORE                | ORD .                   |  |                              |                 |           |                 |            |                                       |          |                    |              |   |  |
| TOTAL CLAIMS  FOR  NUMBER FILED  NUMBER FILED  NUMBER EXTRA  TOTAL CHARGEABLE CLAIMS  MINUS 20= '  INDEPENDENT CLAIMS  MINUS 20= '  If the difference in column 1 is less than zero, enter '0' in column 2  CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  FIGHEST  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  Independent  Independen  | SMALL ENTITY OTHER THE                    |              |                    |                         |  |                              |                 |           |                 |            |                                       |          |                    |              |   |  |
| FOR NUMBER FLED NUMBER EXTRA  TOTAL CHARGEABLE CLAIMS minus 20° .  INDEPENDENT CLAIMS minus 3° .  MULTIPLE DEPENDENT CLAIM PRESENT  If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  INDEPENDENT II  (Column 1) (Column 2) (Column 3)  REMANNING REMAINING  | TO  | TAL CLA      | IMS                | (0                      | olumn 1)                                 | (Colum                       |                 |           |                 |            |                                       |          |                    |              |   |  |
| TOTAL CHARGEABLE CLAIMS minus 200 *   |   | <del></del>  |                    |                         |  |                              |                 |           | RAT             | E FEE      |                                       | 7        | 4                  |              |   |  |
| INDEPENDENT CLAIMS minus 20    INDEPENDENT CLAIMS minus 3   |   |              |                    |                         | MBER FRED                                | NÚMBER                       | NÚMBER EXTRA    |           | BASIC           | FEE 1      | 50.00                                 |          | ļ                  |              |   |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  CLAIMS REMAINING AFTER PRESENT PRESENT PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 3)  Minus  ADDIT FEE  (Column 3)  ADDIT FEE  OR  X200=  TOTAL  OR  OR  ADDIT FEE  OR  ADDIT FE  | 101                                       | AL CHAR      | GEABLE CLAIR       | as                      | minus 20=                                | •                            |                 |           | X\$ 25          |            |                                       |          |                    | _            |   |  |
| * If the difference in column 1 is less than zero, enter '0' in column 2  **CLAIMS AS AMENDED - PART II  **COlumn 1)  | INDEPENDENT CLAIMS                        |              |                    |                         | minus 3 =                                |                              |                 | 1         |                 |            | ·                                     | JOA      | X350               | =            |   |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY  CLAIMS REMARKING AFTER AMENDMENT PREVIOUSLY PAUD FOR AMENDMENT PREVIOUSLY PAUD FOR STALL INTO ADDIT FEE  Independent  | MUL.                                      | TIPLE DE     | PENDENT CLA        | M PRESEN                |  |                              |                 | X100=     |                 | =          | · · · · · · · · · · · · · · · · · · · | OR       | X200               | •            |   |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  (Column 1) (Column 2) (Column 3)  Total  Total  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  CLAIMS REMAINING AFER AMENDMENT  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  CLAIMS REMAINING AFER AMENDMENT  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  CLAIMS REMAINING AFTER AMENDMENT  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  Minus  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  Minus  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  TOTAL ADDIT FEE  OR  ADDIT FEE  OR  X\$50=  OR  ADDIT FEE  OR  X\$50=  TOTAL OR  ADDIT FEE  OR  X\$50=  TOTAL OR  ADDIT FEE  OR  TOTAL OR  ADDIT FEE  OR  TOTAL ADDIT FEE  OR  TOTAL OR  ADDIT FEE  OR  TOTAL ADIT FEE  OR  TOTAL ADDIT FEE  OR   | • If th                                   | ne differen  | ace in column      | 1                       | +180                                     | =                            |                 | OR        | +360:           |            |                                       |          |                    |              |   |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY  CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR TOTAL OR ADDIT FEE  Independent . / Minus 3 = X3.25 OR X200 OR X200 OR X200 OR ADDIT FEE  TOTAL OR ADDIT FEE  TOTAL OR ADDIT FEE  TOTAL OR ADDIT FEE  Independent . / Minus 3 = X100 OR ADDIT FEE  TOTAL OR ADDIT FEE  TOTAL OR ADDIT FEE  TOTAL OR ADDIT FEE  Independent . / Minus 3 = X100 OR X200 OR ADDIT FEE  TOTAL ADDIT FEE  OR ADDIT FEE  TOTAL OR ADDIT FEE  OR ADDIT FEE  TOTAL ADDIT FEE  OR AD  | v. <b>u</b> .                             | io dilici El |                    |                         | i.                                       | TOTA                         |                 |           |                 |            | +                                     | 4        |                    |              |   |  |
| CLAIMS REMAINING AFTER AMENDMENT   COlumn 2   COlumn 3   SMALL ENTITY   OR SMALL ENT  |   |              |                    |                         | DED - PART                               | 11                           |                 |           |                 |            |                                       | , 0, 1   | _                  | -            |   |  |
| AFTER AMENDMENT N. E., PREVIOUSLY PAID FOR EXTRA  Total   // Minus  | T   | 7            |                    |                         |  |                              | olumn 3)        |           | SMAL            | L ENT      | ITY                                   | OR       |                    |              |   |  |
| Total // Minus RO = X\$25= OR X\$50= Independent // Minus RO = X\$25= OR X\$50= Independent // Minus RO = X\$20= OR X\$50= OR | Z /                                       | 1/19/0       | REMAININ<br>AFTER  | G X/                    | Allega                                   | ER PI                        |                 | ·         | DATE            |            |                                       |          |                    | ADD          |   |  |
| TOTAL ADDIT. FEE  Independent   | # 1-                                      |              | AMENDMEN           | 17 / / /                | PAID FO                                  |                              | EXTRA           |           | MIE             |            |                                       |          | RATE               |              |   |  |
| TOTAL ADDIT. FEE  TOTAL ADDIT. FEE  OR AZOUS  ATOTAL ADDIT. FEE  OR ADDIT. FEE  TOTAL ADDIT. FEE  OR ADDIT. FEE  ADDIT. FEE  TOTAL ADDIT. FEE  OR X200S  TOTAL ADDIT. FEE  TOTAL ADDIT. FEE  OR X200S  OR AZOUS  OR ADDIT. FEE  OR ADDIT. FEE  TOTAL ADDIT. FEE  OR TOTAL ADDIT. FEE  OR ADDIT. FEE  OR TOTAL ADDIT. FEE  OR ADDIT. FEE  OR TOTAL ADDIT. FEE  OR ADDIT. FEE  OR ADDIT. FEE  OR TOTAL ADDIT. FEE  OR ADDIT. FEE  OR TOTAL ADDIT. FEE  OR ADDIT. FEE  OR TOTAL ADDIT. FEE  OR ADDIT. FEE  OR ADDIT. FEE  OR TOTAL ADDIT. FEE   |   |              | . //               | euniM                   | -8                                       | 0 =                          |                 | 1         | <b>(\$ 25</b> = | 1          |                                       | اء       | X\$50=             | 1            | 7 |  |
| +180= OR +38Q=  TOTAL OR ADDIT. FEE  CLAIMS REMAINING AFTER AMENDMENT  Total  Independent  Independent  Total  Independent  Total  Tota  | E   1110                                  |              |                    |                         |  |                              |                 | 1         | (100=           | +          | 7                                     |          |                    |              | - |  |
| TOTAL ADDIT. FEE OR ADDIT. FEE  | THE SENTATION OF MULTIPLE DEPENDENT CLAIM |              |                    |                         |  |                              |                 |           |                 | +          |                                       | ORY      | <b>^2</b> 00≈      | <del> </del> | 4 |  |
| COLUMN 1) (COlumn 2) (Column 3)  CLAIMS REMAINING AFTER AMENDMENT NUMBER PREVIOUSLY PAID FOR TOTAL  Independent Minus AMENDMENT CLAIM  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  OR ADDIT FEE   |   |              |                    |                         |  |                              |                 |           |                 |            |                                       | PIC      | +360=              |              |   |  |
| CLAIMS REMAINING AFTER AMENDMENT  Total  Independent  Independent  TIONAL FEE  TRATE  TOTAL  TOTAL  TOTAL  TOTAL  TOTAL  TOTAL  TOTAL  ADDI- TIONAL FEE  TIONAL FEE  TIONAL FEE  TIONAL FEE  TIONAL FEE  TOTAL ADDIT. FEE   | 1-1                                       | 7-07         | (0.1               |                         |  |                              |                 | ADD       |                 |            |                                       | )R A     | TOTAL<br>ODIT, FEE |              | 1 |  |
| HEMAINING AFTER AMENDMENT  Total  Independent  Independen  |   | - 01         | CLAIMS             |                         |  |                              | lumn 3)         |           |                 |            |                                       |          |                    |              | 7 |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  +180=  TOTAL ADDIT, FEE  OR  X200=  OR ADDIT, FEE  OR ADDIT, FEE  |   | •            | AFTER              |                         | NUMBER                                   | PRESE                        |                 |           | ATE             |            |                                       | Γ        | 5455               |              | 1 |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  +180=  TOTAL ADDIT, FEE  OR  X200=  OR ADDIT, FEE  OR ADDIT, FEE  | Tota                                      | al ·         |                    |                         |  |                              |                 |           | - 11 C          | 2          | _                                     | L        | HAIE               |              | - |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  +180=  TOTAL ADDIT, FEE  OR  X200=  OR ADDIT, FEE  OR ADDIT, FEE  |   |              |                    |                         | - 000                                    | ) = /                        |                 | XS        | 25=             |            | 0                                     | R >      | <b>K\$50</b> ≃     |              |   |  |
| +180= OR +360= TOTAL OR TOTAL OR ADDIT. FEE   |   | -            | 1                  | X1                      | 00=                                      |                              | -               |           | (200=           |            | 1                                     |          |                    |              |   |  |
| TOTAL OR TOTAL OR ADDIT, FEE OR ADDIT, FEE  |   |              |                    | OCH PCC D               |  |                              |                 | 7"        | 1               |            |                                       | <b>j</b> |                    |              |   |  |
| ADDIT, FEE ADDIT, FEE   |   |              |                    |                         |  | . /                          |                 |           |                 |            | OF                                    | 3        |                    |              |   |  |
|   |   | •            | (Column 4)         |                         | -  | • /                          |                 |           |                 |            | OF                                    | ADE      | TOTAL<br>JIT. FEEL | 4            |   |  |
| CLAIMS HIGHEST  |   |              | CLAIMS             |                         | (Column 2                                | (Colu                        | mn 3)           |           |                 |            |                                       |          |                    |              |   |  |
| HEMANNING NUMBER PRESENT ADDI- ADDI- ADDI-  |   |              | AFTER              |                         | NUMBER                                   |                              |                 | ĎA'       |                 |            | -                                     |          |                    |              |   |  |
| THE TOTAL PAIE TIONAL   | Thea!                                     |              | · AMENDMENT        |                         |  |                              |                 |           |                 |            | <u>-</u> ]                            | Į. R     | ATE                |              | : |  |
| Independent *   |   | 2040=1       | •                  | 30000334355             | 44                                       | <b>3</b>                     |                 | -X\$-2    | 25=-            | ** ** ***4 |                                       | X:       | \$50=              |              |   |  |
| Minus Are   | <u> </u>                                  |              | TATION OF THE      |                         | 1  | _                            |                 | Ytn       |                 |            | 7                                     | - V0     |                    |              | • |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   X100= OR X200=   | 1101                                      | THE SEN      | HALLON OF MU       | 710                     | -  | <del></del>                  | OR              | X2        | :00=            |            | Ŀ                                     |          |                    |              |   |  |
| the entry in column 1 is less than the entry in column 2, write "o" in column 3.  +180= OR +360= OR +360=   |   |              |                    |                         |  |                              |                 |           |                 |            |                                       |          |                    |              |   |  |
| the "Highest Number Previously Part For IN THIS SPACE Is less than 20, enter 20." ADDIT FEE   | he 'Hi                                    | phest Num    | ber Previously Par | o for in IM             | S SPACE IS less (                        | han 20, ente                 | a 20." A        | מ זוחח    | EE C            |            | OR                                    |          |                    |              |   |  |
| the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE he "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.   | e 'Hig                                    | hest Numbe   | er Previously Paid | For (Total o            | is space is less to<br>Independent) is t | han 3, enter<br>he highest n | 3." Comber foun | nd in the | e appro         | oriale ha  | a in col                              | ADDN     | . FEE L.           |              |   |  |

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

FORM PTO-878 (Rev. 10/04)